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## PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to:

Box ISSUE FEE Assistant Commissioner for Patents Washington, D.C. 20231

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indicated unless corrected maintenance fee notification	below or directed otherw	vise in Block 1, by (a) s	pecifying a new corre	espondence address; a	nd/or (b) indicating a separ	rate "FEE ADDRESS" for
CURRENT CORRESPONDEN	ICE ADDRESS (Note: Logibly me 7590 01/30/200		Note: The certificate of mailing below can only be used for domestic nailings of the Feo(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment of formal drawing, must have its own certificate of mailing.			
Eugene R Sawall Andrus Sceales Starke & Sawell LLP Suite 1100 100 East Wisconsin Avenue Milwaukee, WI 53202-4178				Certificate of Mailing I hereby certify that this Fee(s) Transmittal is being deposited with the United States Fostal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.  (Depositor's name)  (Signature)  (Osto)		
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN		R /	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/585,163 TITLE OF INVENTION: I	06/01/2000 IMPELLER FOR COOLA	NT PUMPS	R. David Morris	•	2614-00029	4751
TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEB	TOTAL FEE(S) DUE	DATE DUE
15	nonprovisional	NO	\$1280	\$0	\$1280	04/30/2002
EXAM	INER	ART UNIT	CLASS-SUBCLAS	is		
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but not required.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form pto/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form pto/SB/122) attached.  Change of correspondence address (or Change of Correspondence attached.  Change of correspondence address (or Change of Correspondence attached.  Change of correspondence address (or Change of Correspondence attached.  Change of correspondence address (or Change of Correspondence attached.  Change of correspondence address (or Change of Correspondence attached.  Change of correspondence address (or Change of Correspondence attached.  Change of correspondence address (or Change of Correspondence attached.  Change of correspondence address (or Change of Correspondence attached.  Change of correspondence address (or Change of Correspondence attached.  Change of correspondence attached.						
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):						
S Issue Fee			Q A check in the amount of the fee(s) is enclosed.			
M Advance Order - # of Conies			Payment by credit card. Form PTO-2038 is attached.  The Commissioner is hereby sutherized by charge the required fee(s), or credit any overpayment, to			
Deposit Account Number 1. 2010 (enclose an extra copy of this form).						
The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.						
NOTE; The Issue Fee and Publication Fee (* required) will not be accepted from snyone other than the applicant; a registered attorney or seem; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.  Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will very depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Office, United States Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington, D.C. 20231  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						10 09585163